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PATENT  
450100-03554

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Hitoshi DATE  
Serial No. : 09/590,832  
Filed : June 9, 2000  
For : CAMERA APPARATUS HAVING COMMUNICATING DEVICE  
AND COMMUNICATION METHOD  
Art Unit :

745 Fifth Avenue  
New York, New York 10151  
Tel. (212) 588-0800

I hereby certify that this correspondence is being  
deposited with the United States Postal Service as  
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Assistant Commissioner for Patents  
Washington, D.C. 20231, on September 27, 2000

Glenn F. Savit, Reg. No. 37,437

Name of Applicant, Assignee or  
Registered Representative

Signature

September 27, 2000

Date of Signature

REQUEST FOR CORRECTED FILING RECEIPT

Application Processing Division  
Customer Correction Branch  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

This is a Request to correct the Filing Receipt issued  
in the above-identified application.

Under Total Claims:

Please change total claims from "4" to --6--.

PATENT  
450100-02554

A copy of the Filing Receipt with the requested correction(s) noted thereon in red ink is also enclosed.

The issuance of a corrected Filing Receipt is respectfully requested.

Please charge any fees required for this correction or credit any overpayment to Deposit Account No. 50-0320.

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP  
Attorneys for Applicant

By: 

Glenn F. Savit  
Reg. No. 37,437  
Tel. (212) 588-0800

Enclosure

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**FILING RECEIPT**

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**UNITED STATES DEPARTMENT OF COMMERCE**  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/590,832	06/09/2000	2714	690	450100-02554	4	9	2

 William S Frommer Esq  
 Frommer Lawrence & Haug LLP  
 745 Fifth Avenue  
 New York, NY 10151

Date Mailed: 08/03/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).**

**Applicant(s)**

Hitoshi Date, Kanagawa, JAPAN;

**Continuing Data as Claimed by Applicant****Foreign Applications**

JAPAN 11-165070 06/11/1999

If Required, Foreign Filing License Granted 08/03/2000

**Title**

Camera apparatus having communicating device and communicating method

**Preliminary Class**

348

Data entry by : SEBSIBE, ALMAZ

Team : OIPE

Date: 08/03/2000


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 FROMMER, LAWRENCE & HAUG, LLP  
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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/590,832	<b>FILING DATE</b> 06/09/2000 <b>RULE</b> —	<b>CLASS</b> 348	<b>GROUP ART UNIT</b> 2714	<b>ATTORNEY DOCKET NO.</b> 450100-02554
<b>APPLICANTS</b> Hitoshi Date, Kanagawa, JAPAN;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 11-165070 06/11/1999				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/03/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 6  <b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> William S Frommer Esq Frommer Lawrence & Haug LLP 745 Fifth Avenue New York, NY 10151				
<b>TITLE</b> Camera apparatus having communicating device and communicating method				
<b>FILING FEE RECEIVED</b> 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	